

F99000005490

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: MAVERICK CONSTRUCTION MANAGEMENT SERVICES, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

100003020351--3

-10/21/99--01065--002

*****87.50 *****87.50

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Timothy M. Jones

(Name of Person)

MAVERICK CONSTRUCTION MANAGEMENT SERVICES, INC.

(Firm/Company)

P.O. Box 60700

(Address)

KING OF PRUSSIA PA 19406

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Timothy Jones

(Name of Person)

at (610) 783-6202

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 OCT 21 PM 2:00

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National Registered Agents, Inc.
... "NRAI, the best choice for statutory representation"

October 19, 1999

Qualification/Tax Lien Section
Divisions of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Maverick Construction Management Services, Inc.

Dear Sir/Madam: ,

Enclosed for filing is an application by Foreign Corporation to Transact Business in the State of Florida for the above named entity accompanied by a check for the \$87.50. Please file returning evidence in the self-stamped addressed envelope.

Should you have any questions, please do not hesitate to contact me at 1-800-767-1553.

Thank you in advance for your cooperation.

Sincerely,


Zulma M. Howarth

ZMH:me

Enclosures

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. MAVERICK CONSTRUCTION MANAGEMENT SERVICES, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. PENNSYLVANIA 3. 23-2933031
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/1/97 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 11/1/99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. P.O. Box 60700
King of Prussia PA 19406
(Current mailing address)

8. To operate a construction management and consulting services business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 526 E. Park Avenue

Tallahassee FL, Florida, 32301
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Zulma M. Howard
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

Timothy M. Jones, Vice President 901 Parkview Dr. # A412 King of Prussia PA 19406
John A. Fiore, President 197M Boston Post Road West #356 Marlboro, MA 01752

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: JOHN A. FIORE

Address: 197M BOSTON POST ROAD WEST MARLBORO MA 01752

Vice President: TIMOTHY M. JONESS

Address: 901 PARKVIEW DR. #A-412 KING OF PRUSSIA PA 19406

Secretary: TIMOTHY M. JONESS

Address: _____

Treasurer: TIMOTHY M. JONESS

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Tim Jones
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TIMOTHY M. JONESS, VICE PRESIDENT
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

SEPTEMBER 29, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

MAVERICK CONSTRUCTION MANAGEMENT SERVICES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Kim Ditzinger

Secretary of the Commonwealth

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